Records Request Form

REQUESTOR'S INFORMATION

1. Name: _____
2. Mailing Address: _____

   _____
3. Phone Number: _____
4. Email Address: _____

REQUEST (Please be as detailed as possible; include names, dates, subjects, meeting dates, resolution, project names, etc.)

_____

_____

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_____

*Use back side if you run out of room.

I acknowledge the following:

Glenwood Municipal Utilities staff should not be expected to abandon or neglect their regular public duties to comply with copy requests and thus need sufficient time to make and deliver any requested copies. If the requested material potentially contains confidential information or is otherwise exempt from disclosure, additional time may be required for review and possible redacting of the material. All requests will be processed in accordance with applicable procedures and rules.

_____ _____

Signature Date of request

Staple completed "Response to Records Request" packet to this from and retain for filing at Glenwood Municipal Utilities. Customer is entitled to a copy of the completed form.